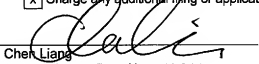


| | | | | | |
|--|---|---|-----------------------------------|-------------------------------|------|
| AMENDMENT TRANSMITTAL LETTER | | | Docket No. 425888003US | | |
| Application No. 10/563,445-Conf. #8028 | Filing Date July 2, 2004 | Examiner K. L. Brooks | Art Unit 1616 | | |
| Applicant(s): Chen et al. | | | | | |
| Invention: HERBICIDE COMPOSITION COMPRISING PYRIBAMBENZ-PROPYL OR PYRIBAMBENZ-ISOPROPYL | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 20 | - 20 = | 0 | x 25.00 | 0.00 |
| Independent Claims | 2 | - 3 = | 0 | x 105.00 | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-0665</u> as described below. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
|  Chef Liang Attorney/Agent Reg. No.: 51,945 | | | | Dated: <u>August 14, 2008</u> | |
| PERKINS COIE LLP P.O. Box 1247 Seattle, Washington 98111-1247 (206) 359-8000 | | | | | |